

# **TRICARE Fundamentals Course**

## **Module 12**

### **Dental**

#### **Participant Guide**



#### **References**

10 U.S.C.

32 C.F.R. §§ 199.13, 22, 4

TRICARE Policy Manual 6010.47-M

## Module Objectives



### Module Objectives

- Explain the TRICARE Dental Program
  - As it applies to the reserves
  - How it works overseas
- Explain the Tri-Service Remote Dental Program
- Explain the TRICARE Retiree Dental Program

## TRICARE Dental Program (TDP)



### TRICARE Dental Program

- Voluntary dental insurance program
  - Active duty family members
  - Selected Reserve and Individual Ready Reserve and their families
- Administered by United Concordia
  - Single and family plans
  - 12-month mandatory enrollment commitment

## Dental Eligibility and Enrollment

### Eligibility

- To be eligible, the sponsor must have at least 12 months of active duty service remaining:
  - New enrollees must continue in the TDP for at least 12 months (lock-in period).
  - Active duty members, as well as Selected Reserve (SELRES) and Individual Ready Reserve (IRR) members on active duty for more than 30 days are not eligible for the TDP.
- Voluntary dental insurance program, eligibles include the following:
  - Active duty family members
  - SELRES and family members
  - IRR and family members
- Eligibility is based on the Defense Enrollment Eligibility Reporting System (DEERS):
  - Uniformed services personnel office reports information in DEERS.
  - Eligibility is verified by the contractor through real-time, on-line access to the DEERS database.
- Age eligibility for children:
  - Children registered in DEERS and enrolled in TDP have dental benefits until the end of their birth month at age 21 years. Example: Child turns 21 on June 15, 2003. Dental coverage continues until June 30 of the same month.
  - Children who continue their education beyond age 21 and are enrolled in TDP have dental benefits until the end of their birth month at age 23. Example: Child is attending university as a full-time student and turns 23 years on June 15, 2003. Dental coverage continues until June 30 of the same month.
  - Children with mental or physical disabilities sustained before turning 21 years, or injuries or illness sustained between the ages of 21 and 23 while they were enrolled full time in a college or university, maintain their dental benefits so long as they are enrolled in TDP.

### Enrollment

- Benefits, limitations, and exclusions are the same for both Continental United States (CONUS) and Outside the Continental United States (OCONUS) service areas
  - CONUS consists of the 50 United States, the District of Columbia, Guam, Puerto Rico, and the U.S. Virgin Islands.
  - OCONUS includes all other global locations not previously listed.
- Two plans: single and family plan
  - Single plan includes one eligible family member or sponsor
  - Family plan includes two or more eligible family members
- Mandatory 12-month enrollment commitment
  - After 12 months, enrollment continues automatically month to month.
- Application must be received by the 20th of the month, for coverage to begin the first day of the next month.
  - If enrollment form and payment are received after the 20th of the month, coverage may not be effective until the first day of the second month due to administrative processing by UCCI.
- Enroll on-line at [www.ucci.com](http://www.ucci.com).
- Enrollment/change applications are available by calling United Concordia (UCCI) at (888) 622-2256.
- Fax application to (888) 734-1944.
- Mail application to UCCI/TDP, Box 827583, Philadelphia, PA 19182-7583.
- All eligible family members of a sponsor must be enrolled if any are enrolled, except:
  - Children under 4 (they are enrolled automatically at age 4)
  - Sponsor has family members living in two or more locales, or children living with divorced parents
- First month premium must be sent with the application.
- Automatic payroll deduction is mandatory. UCCI will notify finance centers and arrange allotments or deductions for future months' premiums. If no payroll account exists, UCCI will bill the member for the monthly premiums.

*Note:* The 12-month mandatory enrollment period may also be waived for family members if they lose DEERS eligibility through divorce, marriage of a child, etc.

**CONUS Access Standards:**

- Enrolled beneficiaries should not have to drive more than 35 miles to see a general dentist in the network. Appointment(s) should be set within 21 days of when the enrolled beneficiary made the call. Should enrolled beneficiaries encounter problems obtaining general dental service(s), they should call the Customer Service Department of UCCI 1-800-866-8499.

**OCONUS Access Standards:**

- Requirements for a dentist to be within 35 miles of a member's home and the 21 day limit for obtaining an appointment do not apply to members in the OCONUS service area.

**Cost to the Beneficiary**

Costs (Feb. 1, 2004, to Jan. 31, 2005) are as follows:

<b>Coverage Type</b>	<b>Active Duty*</b>	<b>SELRES &amp; IRR (Mobilized)</b>	<b>IRR (Non-Mobilized)</b>
Sponsor only	N/A	\$9.07	\$22.68
Single (one family member)	\$9.07	\$22.68	\$22.68
Family (two or more family members)	\$22.66	\$56.66	\$56.66

\* The government pays 60 percent of the premium for active duty families.

**Covered Services and Cost Shares**

<b>Services</b>	<b>Cost Share E1–E4</b>	<b>Cost Share E5 and above</b>
Diagnostic & Preventive	0%	0%
Emergency	0%	0%
Basic Restorative & Sealants	20%	20%
Endodontics	30%	40%
Periodontics	30%	40%
Oral Surgery	30%	40%
Prosthodontic & Other Restorative	50%	50%
Orthodontics	50%	50%
Anesthesia		
General	40%	40%
IV Sedation	50%	50%
Miscellaneous	50%	50%

Annual maximum is \$1,200

- Per eligible, enrolled member
- Does not accrue or rollover
- Does not transfer between family members
- Benefit year Feb. 1 through Jan. 31

Orthodontic services have a separate lifetime \$1,500 maximum.

## Claims

UCCI will accept claims filed on any standard dental claim form of the American Dental Association (ADA) or the TRICARE Dental Program (TDP) claim form developed by UCCI. A separate claim form must be submitted for each member receiving services.

### Claim Submission

- Members in the CONUS service area may go to any authorized/licensed dentist of their choice.
  - The TDP claim form can be downloaded from the UCCI Web site:  
[www.ucci.com/forms/5578\\_CONUS.pdf](http://www.ucci.com/forms/5578_CONUS.pdf)

Provider	UCCI Pays	Who Submits Claim
Participating Dentist	Dentist	Dentist
Nonparticipating Dentist	Beneficiary	Beneficiary

- All claim forms should be submitted to UCCI within 60 days of the date of service.
  - Claims postmarked more than 12 months after the month in which the service was provided will be denied.
- For claims involving an orthodontic treatment plan, the banding date is used to determine timely filing.
- For services performed by a participating dentist, UCCI will pay the dentist directly for covered services, less any cost share.
- For services performed by a nonparticipating dentist, UCCI will pay the member for eligible, covered services, up to UCCI's allowance, less any cost share.
  - Any part of the dentist's fee exceeding UCCI's allowance is the member's responsibility.
  - UCCI will pay a non-participating dentist directly only if benefits have been assigned to that non-participating dentist.
  - Assignment may be accepted by the dentist on a claim-by-claim basis.

## TRICARE Dental Program as it Applies to Reserves



### TRICARE Dental Program Reserves



- **Selected Reserve (SELRES) and families**
- **Individual Ready Reserve (IRR) and families**
- **Activated > 30 consecutive days, same benefits as active duty service members**
  - **Must receive care from military dental providers or through the Tri-Service Remote Dental Program**
- **Family members, eligible for lower premiums that active duty family members have**

### Reserve Component Members

- Reserve component members enrolled in the TDP who are activated for more than 30 consecutive days are automatically disenrolled from the program and become eligible for the same dental benefit the active duty service members have.
  - Reserve component members must receive care from military dental providers or through the Tri-Service Remote Dental Program (RDP) as appropriate or be responsible for paying for any nonauthorized civilian dental care.

### Eligibility

The 12-month eligibility/enrollment requirement is waived for Reserve component members called to active duty in support of a contingency operation for more than 30 consecutive days if the TDP enrollment application is received by the dental contractor within 30 days from the sponsor's activation date. Otherwise, the 12-month mandatory enrollment period applies.

Web site [www.ucci.com/was/uccweb/tdp/tdp\\_news.jsp#one](http://www.ucci.com/was/uccweb/tdp/tdp_news.jsp#one).

Families who wish to enroll after their sponsors are mobilized for more than 30 consecutive days will be able to join at the active duty rates during the first 30 days of the sponsor's activation:

- SELRES and IRR sponsors can enroll independently of their family.
- Family members can enroll independently of the sponsor.
- Families who had previously declined TRICARE dental coverage but who wish to enroll after their sponsors are mobilized will be able to join at active-duty rates during the first 30 days of the sponsor's activation.

**Access standards are the same as for active duty members and their families.**

### **Cost to the Beneficiary**

#### **TDP Monthly Premiums (February 2004–January 2005)**

<b>Coverage Type</b>	<b>Active Duty</b>	<b>SELRES &amp; IRR (Mobilization Category)</b>	<b>IRR (Non- Mobilization Category)</b>
Sponsor Only	N/A	\$9.07	\$22.68
Single(One Family Member)	\$9.07	\$22.68	\$22.68
Family (Two or More Family Members)	\$22.66	\$56.66	\$56.66

- Reserve family members in the Dental Program pay monthly premiums of \$22.68 for Single (one family member) or \$56.66 for a Family enrollment.
- If the Reserve sponsor is called to active duty, the premiums fall to the active duty rates of \$9.07 per month for one family member or \$22.66 for two or more family members.



### **Benefits after Demobilization**


Reserve component members ordered to active duty for more than 30 consecutive days in support of a contingency operation (does not include full-time National Guard Duty) are entitled to transitional health care benefits upon separation:

- Members separated with less than 6 years Total Active Federal Military Service (TAFMS)
  - Member and eligible family members are eligible for up to 60 days transitional health care.
- Members separated with 6 or more years TAFMS
  - Member and eligible family members are eligible for up to 120 days of transitional health care.


*Note:* Reserve component members ordered to active duty for more than 30 consecutive days in support of a contingency operation (does not include full-time National Guard Duty) and their family members are not eligible for transitional dental benefits, but may use benefits under TDP. Reserve component members leaving active duty status who were previously enrolled in the TDP are automatically re-enrolled in the TDP.

Reserve component members have access to the military dental treatment facilities (DTFs) on a space-available basis only. Reserve members using transitional benefits have TDP and the Department of Veterans Affairs (VA) Medical Centers as other available options.

## How the TRICARE Dental Program Functions Overseas



### TRICARE Dental Program Overseas



- **OCONUS service area includes all other countries, island masses, and territorial waters not in the CONUS service area**
- **Remote vs. non-remote countries**
- **Benefits, limitations, and exclusions are same for both CONUS and OCONUS service areas**
- **May pay for covered services before they are rendered and then file a claim**
- **OCONUS POC Program**

- OCONUS service area includes all other countries, island masses, and territorial waters not in the CONUS service area (the 50 United States, District of Columbia, Canada, Puerto Rico, Guam, and the U.S. Virgin Islands).
- Additionally, any services provided on a ship or vessel that is outside of the territorial waters of the CONUS service areas are covered under the OCONUS service area. The OCONUS service area is categorized into non-remote and remote locations.

### Non-remote vs. Remote Countries

- Non-remote locations are those OCONUS countries that have a fixed uniformed services overseas dental treatment facility (ODTF).
  - Non-remote countries include the following:
    - Azores, Bahrain, Belgium, Diego Garcia, Germany, Iceland, Italy/Sardinia, Japan, Portugal, South Korea, Spain, Turkey, United Kingdom
  - If ODTFs are unable to provide the TDP covered services, they may authorize enrolled members to receive the covered services from host country dentists.
- Remote locations are those OCONUS countries that do not have fixed uniformed services ODTFs, including those that may have a part-time fixed ODTF. All countries not on the non-remote OCONUS list (above) are considered remote.

### **Eligibility**

- Active duty family members do not have to be command-sponsored, listed on the sponsor's change of assignment orders, or formally recognized as a family member on an accompanied tour to receive dental care in the OCONUS service area.

### **TRICARE Dental Program Benefits Overseas**

- Some covered services may be unavailable in some OCONUS locations.
- Additionally, family members may have to pay for covered services before they are rendered and they then file a claim with UCCI for reimbursement.
- Family members of active duty service members in non-remote countries must receive a non-availability and referral form (NARF) and use dentists on the OCONUS provider listing for both routine dental care and orthodontic care outside the ODTF.
- TDP enrollees in remote OCONUS countries must receive a NARF and use the OCONUS provider listing for orthodontic care only, but may use any dentist for non-orthodontic (routine) dental services; however, seeking dental care from the OCONUS provider listing is encouraged.
- For more information about receiving orthodontic care in OCONUS areas including cost shares, payment procedures, and transferring orthodontist care from CONUS to OCONUS areas, please visit the TRICARE Dental Program Web site at [www.ucci.com/was/uccweb/tdp/tdp.jsp](http://www.ucci.com/was/uccweb/tdp/tdp.jsp) and download the benefits booklet.

### **OCONUS Dentists**

- ODTFs and the overseas Lead Agents identify host nation dentists and place them on the OCONUS provider listing, which is available from the ODTFs.
  - This information may also be available from the U.S. Embassy or Consulate Office.
  - In non-remote countries, most care will be received at the ODTF.

### **Non-Availability/Referral Form (NARF)**

- Family members of active duty service members in non-remote countries must receive a NARF and use dentists on the OCONUS provider listing for both routine dental care and orthodontic care outside the ODTF.
- TDP enrollees in remote OCONUS countries must receive a NARF and use the OCONUS provider listing for orthodontic care. However, remote enrollees may use any dentist for non-orthodontic (routine) dental services. Seeking dental care from the OCONUS provider listing is encouraged.

### OCONUS Dental Claims

- The TRICARE Dental Program OCONUS claim form (Attending Dentist's Statement), is available from overseas Lead Agents, ODTFs, designated OCONUS Points of Contact (POCs), or it can be downloaded from [www.ucci.com/was/uccweb/home.jsp](http://www.ucci.com/was/uccweb/home.jsp).
- All claims should be submitted to UCCI within 60 days.
- Claims postmarked more than 12 months after the month in which the service was provided will be denied.
- To file a claim, beneficiaries submit a completed claim form, the dentist bill, or statement of charges and the NARF to United Concordia, TDP OCONUS Dental Unit, P.O. Box 69418, Harrisburg, PA 17106-9418.

### Tri-Service Remote Dental Program (RDP)



### Administration

- The MMSO administers the RDP at the direction of the TRICARE Management Activity (TMA) and the Services.
- The purpose of RDP is to augment, not replace, dental care provided by active duty DTFs.
- Extends uniform dental benefit of active duty service members (ADSMs) to TRICARE Prime Remote locations.

### **Types of Services**

- No preferred dental provider network exists.
- Treatment may be provided from any licensed dentist in CONUS which consists of the 50 United States and the District of Columbia (different from TDP).
- No deductible or copay exists for appropriately preauthorized covered procedures.

### **Authorization Requirements**

- Emergency dental care does not require preauthorization. See definition of emergency care in the RDP guidelines.
- Preauthorization is required for all specialty care as well as routine care that exceeds cost limitations outlined in the RDP guidelines.
- For extensive or questionable treatment plans, evaluation at a DTF may be required.
- All procedures must meet the requirement of being appropriate and necessary to establish or maintain dental health for worldwide readiness and deployability. Note: Procedures that are either elective or may compromise worldwide deployability or dental readiness are not likely to be covered.

### **Eligibility**

- Dental care for remotely stationed DoD ADSM
- TRICARE Prime Remote (TPR) members enrolled automatically.
  - Remote is 50 miles or more from a military base.
- ADSM eligibility criteria:
  - Continuous active duty for more than 30 days
  - Transitional Assistance Management Program (TAMP) service members entitled to care at active duty DTFs only. TAMP benefit does not include payment for dental care by a civilian provider. The TAMP service member may be eligible for civilian care through a Veterans Administration program, but not through the RDP or MMSO.

*Note:* Reserve members who were previously enrolled in the TDP program are automatically disenrolled from the TDP because the service member is now able to receive dental care from active duty DTFs or through the RDP as appropriate.

### **Military Medical Support Office's Dental Role**

- MMSO is the centralized Tri-Service point of contact for the following:
  - Manages medical/dental cases
  - Coordinates civilian health care services outside cognizance of MTF for ADSM and Reserve components
- MMSO provides preauthorization and claims processing for dental care by civilian dentists.
- If deployed, once ADSMs are activated and assigned to a mobilization site with a DTF, they are no longer eligible for RDP benefits. All care is the responsibility of the DTF.
  - Overseas assigned/deployed ADSMs are expected to receive their dental care at military DTFs; they are no longer eligible for RDP benefits.
  - ADSMs are not eligible for funding of dental care by a foreign civilian dentist through MMSO.
  - Any dental treatment for an overseas deployed ADSM by a civilian dental provider will need to be arranged in accordance with appropriate Service specific regulations/instructions. The TRICARE Lead Agent for that region is also a POC for specific guidance.

### **Tri-Service RDP Coverage**

#### Procedures for Requesting Preauthorization

- Command Memorandum from military unit (see MMSO Web site [http://mmso.med.navy.mil/MMSO\\_Dental\\_Info.html](http://mmso.med.navy.mil/MMSO_Dental_Info.html) for a sample) that includes the following:
  - Treatment plan from provider with ADA procedure code and description and itemized cost for each procedure
  - Current diagnostic-quality radiographs
  - Additional information as deemed appropriate
  - Mail (do not fax, X-rays do not fax well) to the following:  
The Military Medical Support Office  
Attention: Dental Pre-authorizations  
P.O. Box 886999  
Great Lakes, IL 60088-6999

#### Emergency Care

- Emergency care does not require preauthorization.
- This includes any treatment necessary to relieve pain, treat infection, or control hemorrhage to include the following:
  - Temporary or permanent fillings, root canal treatment, extractions, or other immediate required treatment

Routine Care

- Routine dental treatment can be completed without first obtaining preauthorization as long as the treatment meets all of the following requirements:
  - Routine care, diagnostic (exam and X-rays), preventive (cleanings)
  - Routine restoration (amalgam or composite fillings)
  - Single tooth extractions
  - Total cost of treatment or appointment must be less than \$500

*Note:* Treatment that exceeds \$1,500 per calendar year (CY) requires preauthorization.

**What Is Not Covered?**

- Experimental drugs or medications considered adjunctive (not primary) therapy
- Over-the-counter medications or other non-covered or non-dentist prescribed medications
- Supplies for home use (toothbrushes, mouth rinses, and other over-the-counter personal hygiene supplies)
- Plaque control program, oral hygiene, and dietary instructions
- Sealants and fluoride treatment for adult patients are not covered unless preauthorized.
- Cosmetic treatment (bleaching, bonding, porcelain veneers, etc.)
- Porcelain or composite resin inlays/onlays and gold foil restorations
- Composite resin or all-porcelain full or partial coverage crowns
- Civilian orthodontic treatment (braces)
- Implants and related procedures and elective procedures such as replacement of serviceable crowns, bridges, and other existing dental restorations or prostheses
- See MMSO Web site [http://mmso.med.navy.mil/MMSO\\_Info.html](http://mmso.med.navy.mil/MMSO_Info.html) for complete listing.

## TRICARE Retiree Dental Program



### TRICARE Retiree Dental Program

- Voluntary dental insurance program
- Administered by Delta Dental Plan of California
- Basic and enhanced enrollment options
- All premiums are paid by the enrollee and vary depending on where the enrollee lives
- Enrollees can visit any licensed dentist of their choice

- The TRICARE Retiree Dental Program (TRDP) is a national, combined fee-for-service/preferred provider program that offers enrollees access to any licensed dentist in all 50 states, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa, the Commonwealth of the Northern Mariana Islands, and Canada.
  - With its current enrollment of nearly 700,000, the TRDP is the nation's largest voluntary, all enrollee-paid dental program.



### **Eligibility**

- Delta Dental Plan administers the TRDP.
- Enrollment in the TRDP is voluntary and open to the following:
  - A member of the uniformed services who is entitled to uniformed services retired pay, even if the member is 65 years or over
  - A current spouse of an enrolled member
  - A member of the retired Reserve/Guard, including a “gray-area Reservist” who is entitled to retired pay but will not begin receiving it until age 60
  - A child of an enrolled member, up to age 21 (to age 23 if a full-time student, or older if disabled before losing eligibility)
  - An unremarried surviving spouse or eligible child of a deceased member who died while in retired status or while on active duty
  - A Congressional Medal of Honor recipient and eligible immediate family members, or an unremarried surviving spouse/eligible immediate family members of a deceased recipient
  - A current spouse and/or eligible child of certain non-enrolled member with documented proof the non-enrolled member is: (a) eligible to receive ongoing comprehensive dental care from the VA; or (b) enrolled in a dental plan through employment and the plan is not available to family members; or (c) unable to obtain benefits through the TRDP due to a current and enduring medical or dental condition.

### **Enrollment**

Uniformed services retirees and their families are encouraged to check into the TRDP. Benefits under the TRDP have been enhanced from the original basic coverage to form the most comprehensive dental benefits program ever available to uniformed services retirees and their family members. Enhanced coverage under the TRDP became effective October 1, 2000. TRDP is separate from the TDP.

### **New Retiree Enrollment Opportunity**

Newly retired members of the uniformed services who enroll in the enhanced TRDP within 120 days after their retirement from active duty military service have a special opportunity to begin coverage with additional benefits, normally subject to a 12-month waiting period. Additional benefits normally subject to the 12-month waiting period are as follows:

- Cast crowns, cast restorations, and bridges covered at 50 percent
- Coverage for full and partial dentures at 50 percent
- Orthodontic coverage for both adolescents and adults at 50 percent

Those who wait to enroll after this 120-day period will not receive these benefits until after 12 months of continuous enrollment in the enhanced TRDP. These benefits are in addition to the immediate benefits of the following:

- Two cleanings in a 12-month period
- An allowance toward payment for tooth-colored fillings on back teeth
- Dental accident coverage
- Additional diagnostic and preventive services
  
- Two TRDP enrollment options are as follows:
  - Basic: enrollment period ended August 31, 2000.
  - Basic coverage continues for those who were enrolled in TRDP prior to September 1, 2000, and who do not upgrade to the enhanced program
  - Enhanced: effective for all enrollments September 1, 2000, and after.
- Delta Dental handles all enrollments, [www.ddpdelta.org](http://www.ddpdelta.org)
- There is a minimum 12-month commitment to stay in the TRDP after which enrollment may be continued month to month.
  - However, a 30-day grace period exists from the coverage effective date during which voluntary termination of enrollment is allowed without further enrollment obligation provided that no benefits have been used.

### Coverage

- All premiums are paid by the enrollee and vary depending on where the enrollee lives.
  - Premium rates will change slightly on May 1 of each benefit year.
- Enrollees do not have to visit a TRDP participating dentist (DeltaSelect USA network or DeltaPreferred network) for dental treatment but can visit any licensed dentist of their choice.
  - Enrollees may also use the DeltaPremier program dentists. DeltaPremier USA dentists will not charge more than the agreed fees they have with Delta Dental.
  - Enrollees are responsible for the copayments and deductibles, as applicable, plus any difference in agreed fees and the TRDP allowable for non-participating dentists.

Provider	Delta Dental Pays	Who Submits Claim
Network or DeltaPremier	Provider	Provider
The enrollee is responsible only for the enrollee's percentage of the TRDP allowed amount.		
Nonparticipating	Beneficiary	Beneficiary
The enrollee is also responsible for the difference between the TRDP allowed amount and the dentist's billed charge		

**Premium Rates**

Premium rates for the enhanced TRDP vary depending upon location. To view the premium rate for a specific region, visit the Delta Dental Web site at [www.ddpdelta.org/enhanced/premiums.htm](http://www.ddpdelta.org/enhanced/premiums.htm) and enter the five-digit ZIP Code.

Canada residents should, enter “99999” as your ZIP Code. If you reside outside of the U.S and Canada and do not have a U.S. postal code, enter “00000” as your ZIP Code.

**Benefits Offered with the Enhanced TRICARE Retiree Dental Program:**

<b>Dental Benefits</b>	<b>What TRDP Pays</b>	<b>What You Pay</b>
<b>Available during the first 12 months of enrollment</b>		
Diagnostic and preventive services	100%	0%
Basic restorative services	80%	20%
Drugs, endodontic, periodontic, oral surgery, and anesthesia services	60%	40%
Emergency services	100%	0%
Dental accident coverage	100%	0%
<b>Added after 12 months of continuous service</b>		
Cast, crowns, onlays, and inlays	50%	50%
Partial/full bridges and dentures	50%	50%
Orthodontia	50%	50%

*Notes:* The new program continues to carry a \$50 per person, per-year deductible, but now includes an annual family cap of \$150 and an increased annual maximum amount of \$1,200 for which preventive and diagnostic services are not counted. Orthodontic services have a separate \$1,200 lifetime maximum and dental accident coverage has a separate \$1,000 annual maximum benefit.

### **Claims**

- The TRDP accepts any standard dental claim form and does not require enrollees to use a special form to submit claims.
- One advantage of seeking treatment from a participating network or DeltaPremier USA dentist is that the dentist will complete and submit all the claims paperwork for the enrollee.
- Some out-of-network dentists may provide this service as well, or they may give the enrollee a standard dental claim form to complete on their own.
- Delta Dental has developed a claim form that can be downloaded from its Web site at [www.ddpdelta.org/dwnld/claimform.pdf](http://www.ddpdelta.org/dwnld/claimform.pdf).
- Enrollees may contact Delta Dental's Customer Service staff for assistance in completing the form by calling (888) 838-8737.

### **Dental Explanation of Benefits**

- A Dental Explanation of Benefits (DEOB) is a statement that explains how a claim was processed.
  - When a claim is processed, a DEOB is generated and mailed to the enrollee explaining what services were covered and the amount of cost share, if any.
  - If there is a cost share amount, the enrollee must pay that amount to the dentist as well as any non-covered costs.
  - Participating dentists will also receive a copy of the DEOB.
  - Non-participating dentists will receive a DEOB if they submitted the claim and payment is being issued.
  - See sample DEOB at the end of this module.

## Customer Service Commentary

### Customer Service Do's:

- Project a positive, can-do attitude.
- Make every effort to communicate clearly. Validate the customer's level of understanding. "Dual" agreement is important to the communication process.
- Ask the customer if you can be of further service.
- Leave a lasting positive impression. Be sure to thank the customer for visiting your office/clinic. Recall, customers have choices—we want to be their choice!

### Customer Service Don'ts:

- Don't offer excuses—focus on the positive—on what you can do to regain the customer's loyalty and confidence. Learn from the experience to prevent similar mistakes from happening in the future.
- Don't over promise! Ensure that what you commit to follows organizational policies and regulations. Don't put yourself in a sticky situation.
- Don't change appointment dates or anything that was previously agreed upon by you and the customer unless you inform the customer first. This is a surefire way to get an angry customer. Effective communication is key!
- Don't get stressed out! It shows. Take the time needed to refill your fuel tank. If you are stressed, the customer will sense it. We owe it to our customers to provide exceptional customer service regardless of how we are feeling. Remember—"Customers First!"

## Resources

### TRICARE Dental Program

- Enroll on-line at [www.ucci.com](http://www.ucci.com)
- Enrollment/change applications are available by calling United Concordia (UCCI) at (888) 622-2256
- Fax application to (888) 734-1944
- Mail application to UCCI/TDP, Box 827583, Philadelphia, PA 19182-7583

Reserve Affairs has set up a family readiness Web site at

[www.defenselink.mil/ra/familyreadiness.html](http://www.defenselink.mil/ra/familyreadiness.html).

Frequently asked questions: [www.ucci.com/was/uccweb/tdp/faq.jsp](http://www.ucci.com/was/uccweb/tdp/faq.jsp)



### TRICARE Overseas Dental Program Fact Sheet

[www.tricare.osd.mil/factsheets/index.cfm?fx=showfs&file\\_name=Dental%5FOverseas%2Ehtm](http://www.tricare.osd.mil/factsheets/index.cfm?fx=showfs&file_name=Dental%5FOverseas%2Ehtm)

POCs and MMSO Web site.

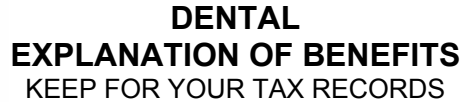
- DoD ADSM: MMSO, 1-888-647-6676
- [http://mmso.med.navy.mil/MMSO\\_Dental\\_Info.html](http://mmso.med.navy.mil/MMSO_Dental_Info.html)
- USPHS & NOAA: Beneficiary Medical Program, 1-800-368-2777 Option 2
- Coast Guard: 1-800-942-2422

## Summary



## Module Objectives

- Explain the TRICARE Dental Program
  - As it applies to the reserves
  - How it works overseas
- Explain the Tri-Service Remote Dental Program
- Explain the TRICARE Retiree Dental Program



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